

1866 UPTPTO 09 MAR 2005

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/527249

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1	1				
2		1				
3		1				
4		1				
5		1				
6		1				
7		6				
8		6				
9		6				
10		6				
11		6				
12	1	1				
13		1				
14		1				
15		1				
16		1				
17		5				
18		5				
19	1	5				
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49						
50						
TOTAL IND.	3	4		4		4
TOTAL DEP.	49	4		4		4
TOTAL CLAIMS	52					

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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97						
98						
99						
100						
TOTAL IND.		4		4		4
TOTAL DEP.		4		4		4
TOTAL CLAIMS						